



Date: 14/08/2020

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Trip Number 8550106151

Travel Expense Statement

Trip Number 8550106151

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 27/04/2018 07:30 AM

Trip End Date: 27/04/2018 10:00 AM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 8 Adelaide Street W, Toronto, ON

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	16.00
Reimbursement Amount	16.00

Cost Assignment

16.00 CAD of 16.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC

Cost Center: 397188800 Director EIOD

Order:

Fund:

Functional Area: 20100 Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



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Trip Number 8550106151

Travel Expense Statement

Trip Number 8550106151

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 27/04/2018 07:30 AM

Trip End Date: 27/04/2018 10:00 AM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/04/2018	001	Parking/ Tolls	16.00	CAON
		Sum of Receipts	16.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking receipt

Comments

Meeting with Deloitte



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Trip Number 8550106152

Travel Expense Statement

Trip Number 8550106152

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 27/04/2018 11:00 AM

Trip End Date: 27/04/2018 15:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 3389 Steeles Avenue East, Toronto, ON

Departure Address: 1980 Matheson Blvd E, Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	9.00
Reimbursement Amount	9.00

Cost Assignment

9.00 CAD of 9.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC

Cost Center: 397188800 Director EIOD

Order:

Fund:

Functional Area: 20100 Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550106152

Travel Expense Statement

Trip Number 8550106152

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 27/04/2018 11:00 AM

Trip End Date: 27/04/2018 15:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/04/2018	001	Parking/ Tolls	9.00	CAON
		Sum of Receipts	9.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description Additional Text for Receipt	Parking receipt Parking receipt

Comments

JMT meeting, CFSEU



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Trip Number 8550106456

Travel Expense Statement

Trip Number 8550106456

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 15/05/2018 11:00 AM

Trip End Date: 15/05/2018 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 3389 Steeles Avenue East, Toronto, ON

Departure Address: 6900 Airport Rd, Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	9.00
Reimbursement Amount	9.00

Cost Assignment

9.00 CAD of 9.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC

Cost Center: 397188800 Director EIOD

Order:

Fund:

Functional Area: 20100 Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550106456

Travel Expense Statement

Trip Number 8550106456

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 15/05/2018 11:00 AM

Trip End Date: 15/05/2018 16:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
15/05/2018	001	Parking/ Tolls	9.00	CAON
		Sum of Receipts	9.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description Additional Text for Receipt	Parking receipt Parking at RCMP

Comments

Meeting with CFSEU and INSET at RCMP



Date: 14/08/2020

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Trip Number 8550107902

Travel Expense Statement

Trip Number 8550107902

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 27/06/2018 08:00 AM

Trip End Date: 27/06/2018 13:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 3389 Steeles Avenue East, Toronto, ON

Departure Address: 6900 Airport Rd, Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	9.00
Reimbursement Amount	9.00

Cost Assignment

9.00 CAD of 9.00 CAD assigned to:

Company Code: 0850 CBSA / ASFC

Cost Center: 397188800 Director EIOD

Order:

Fund:

Functional Area: 20100 Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550107902

Travel Expense Statement

Trip Number 8550107902

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 27/06/2018 08:00 AM

Trip End Date: 27/06/2018 13:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/06/2018	001	Parking/ Tolls	9.00	CAON
		Sum of Receipts	9.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description Additional Text for Receipt	Parking receipt Parking @ RCMP office

Comments

Meeting w/RCMP



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Trip Number 8550108758

Travel Expense Statement

Trip Number 8550108758

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 10/08/2018 09:30 AM

Trip End Date: 10/08/2018 15:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Bay and College - TPS HQ

Departure Address: 6900 Airport Rd, Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	24.70
Reimbursement Amount	24.70

Cost Assignment

24.70 CAD of 24.70 CAD assigned to:

Company Code: 0850 CBSA / ASFC

Cost Center: 397188800 Director EIOD

Order:

Fund:

Functional Area: 20100 Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550108758

Travel Expense Statement

Trip Number 8550108758

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 10/08/2018 09:30 AM

Trip End Date: 10/08/2018 15:30 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
10/08/2018	001	Public Transit	24.70	CAON
		Sum of Receipts	24.70	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Public Transit	Description	UP Express train tickets

Comments

Meeting with EIOD-NHQ and Toronto Police Services re: partnership



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Trip Number 8550109004

Travel Expense Statement

Trip Number 8550109004

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 17/08/2018 11:30 AM

Trip End Date: 17/08/2018 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 1 Front Street West

Departure Address (home)

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	20.30
Reimbursement Amount	20.30

Cost Assignment

20.30 CAD of 20.30 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397188800	Director EIOD
Order:		
Fund:		
Functional Area:	20100	Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550109004

Travel Expense Statement

Trip Number 8550109004

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 17/08/2018 11:30 AM

Trip End Date: 17/08/2018 16:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
17/08/2018	001	Public Transit	20.30	CAON
		Sum of Receipts	20.30	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Public Transit	Description Additional Text for Receipt	GO Train GO Train receipt, home to 1 Front St W. Day pass = same price as two one-way trips.

Comments

Meeting with NHQ & NGOs re: Detentions



Date: 14/08/2020

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Trip Number 8550109733

Travel Expense Statement

Trip Number 8550109733

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 07/09/2018 08:00 AM

Trip End Date: 07/09/2018 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St, Hamilton, ON

Departure Address (home)

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	10.00
Reimbursement Amount	10.00

Cost Assignment

10.00 CAD of 10.00 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397188800	Director EIOD
Order:	
Fund:	
Functional Area: 20100	Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550109733

Travel Expense Statement

Trip Number 8550109733

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 07/09/2018 08:00 AM

Trip End Date: 07/09/2018 16:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
07/09/2018	001	Parking/ Tolls	10.00	CAON
		Sum of Receipts	10.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description Additional Text for Receipt	Parking receipt Parking at Hamilton EIOD office

Comments

Meeting with employees at EIOD-Hamilton/Kitchener



Date: 14/08/2020

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Trip Number 8550111582

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 06/11/2018 14:00 PM

Trip End Date: 06/11/2018 17:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 789 Yonge Street, Toronto, ON

Departure Address: 6900 Airport Rd, Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	25.00
Reimbursement Amount	25.00

Cost Assignment

25.00 CAD of 25.00 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397188800	Director EIOD
Order:	
Fund:	
Functional Area: 20100	Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550111582

Travel Expense Statement

Trip Number 8550111582

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 06/11/2018 14:00 PM

Trip End Date: 06/11/2018 17:30 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/11/2018	001	Parking/ Tolls	25.00	CAON
		Sum of Receipts	25.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking receipt

Comments

Representing CBSA at the Ontario Federal Council's Networking Event. Participated as executive mentor.



Date: 14/08/2020

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Trip Number 8550111583

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 07/11/2018 08:15 AM

Trip End Date: 07/11/2018 13:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 40 College St, Toronto, ON

Departure Address (home)

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	20.00
Reimbursement Amount	20.00

Cost Assignment

20.00 CAD of 20.00 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397188800	Director EIOD
Order:		
Fund:		
Functional Area:	20100	Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550111583

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 07/11/2018 08:15 AM

Trip End Date: 07/11/2018 13:30 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
07/11/2018	001	Parking/ Tolls	20.00	CAON
		Sum of Receipts	20.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking receipt

Comments

CBSA representative at media event, Toronto Police Services HQ



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Trip Number 8550119497

Travel Expense Statement

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 16/05/2019 07:30 AM

Trip End Date: 16/05/2019 15:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St, Hamilton, ON

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	11.00
Reimbursement Amount	11.00

Cost Assignment

11.00 CAD of 11.00 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397188800	Dir. Int. & Enf. GTA
Order:		
Fund:		
Functional Area:	20100	Immigration Investi.

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550119497

Travel Expense Statement

Trip Number 8550119497

Personnel Number:

Traveller's Name: David GLOS

Trip Start Date: 16/05/2019 07:30 AM

Trip End Date: 16/05/2019 15:30 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
16/05/2019	001	Parking/ Tolls	11.00	CAON
		Sum of Receipts	11.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description Additional Text for Receipt	Parking receipt Parking at 55 Bay St, Hamilton

Comments

RSMT & Employee Town Hall



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Trip Number 8550063344

Travel Expense Statement

Trip Number 8550063344

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 26/03/2013 07:00 AM

Trip End Date: 26/03/2013 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 6. Prior to April 1, 2014/ SAP TAN:

Trip Type Statutory: CDF: 000

Destination: Mississauga

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Meeting with CAPIC

Summary of Settlement

Expenses	Amount (CAD)
Travel Flat Rates	55.55
Reimbursement Amount	55.55

Cost Assignment

55.55 CAD of 55.55 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397188800	Director EIOD
Order:	
Fund: 2001	Operating-Non-Salary
Functional Area: 81501	TRAVEL & OTHER ADM CLOSED

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	

Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
26/03/2013	101	0.55	Employer Request, Ontario	55.55
				55.55



Date: 18/08/2020

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Trip Number 8550063344

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 26/03/2013 07:00 AM

Trip End Date: 26/03/2013 19:00 PM

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

March 26, 2013

Kilometers: 101

Trip Number 8550063344



Date: 18/08/2020

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Trip Number 8550063345

Travel Expense Statement

Trip Number 8550063345

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 08/03/2013 07:00 AM

Trip End Date: 08/03/2013 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 6. Prior to April 1, 2014/ SAP TAN:

Trip Type Statutory: CDF: 000

Destination: Mississauga

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Meeting with YWCA

Summary of Settlement

Expenses	Amount (CAD)
Travel Flat Rates	52.80
Reimbursement Amount	52.80

Cost Assignment

52.80 CAD of 52.80 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397188800	Director EIOD
Order:	
Fund: 2001	Operating-Non-Salary
Functional Area: 81501	TRAVEL & OTHER ADM CLOSED

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	

Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
08/03/2013	96	0.55	Employer Request, Ontario	52.80
				52.80



Date: 18/08/2020

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Trip Number 8550063345

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 08/03/2013 07:00 AM

Trip End Date: 08/03/2013 19:00 PM

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

March 8, 2013

Kilometers: 96

Trip Number 8550063345



Date: 18/08/2020

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Trip Number 8550068183

Travel Expense Statement

Trip Number 8550068183

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 14/01/2014 07:00 AM

Trip End Date: 14/01/2014 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 6. Prior to April 1, 2014/ SAP TAN:

Trip Type Statutory: CDF: 000

Destination: TORONTO

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: MEETING WITH RDG

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	15.10
Travel Flat Rates	70.40
Sum of Receipts to be Reimbursed	10.00
Reimbursement Amount	95.50

Cost Assignment

95.50 CAD of 95.50 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397150000	Dir. Comm. Ops
Order:	
Fund: 2001	Operating-Non-Salary
Functional Area: 80101	MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
14/01/2014	001	Lunch	15.10	CAON
		Sum Meals & Incid. man. keyed	15.10	
		Total Meals and Incidentals	15.10	

Kilometer Allowance



Date: 18/08/2020

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Trip Number 8550068183

Travel Expense Statement

Trip Number 8550068183

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 14/01/2014 07:00 AM

Trip End Date: 14/01/2014 19:00 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
14/01/2014	128	0.55	Employer Request, Ontario	70.40
				70.40

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

January 14, 2014

Kilometers: 128

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
14/01/2014	002	Parking/ Tolls	10.00	CAON
		Sum of Receipts	10.00	CAON



Date: 18/08/2020

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Trip Number 8550068231

Travel Expense Statement

Trip Number 8550068231

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 20/08/2013 07:00 AM

Trip End Date: 20/08/2013 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 6. Prior to April 1, 2014/ SAP TAN:

Trip Type Statutory: CDF: 000

Destination: HAMILTON

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: MEETING AT HAMILTON AIRPORT

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	15.15
Travel Flat Rates	126.50
Sum of Receipts to be Reimbursed	14.00
Reimbursement Amount	155.65

Cost Assignment

155.65 CAD of 155.65 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397150000	Dir. Comm. Ops
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	80101	MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/08/2013	001	Lunch	15.15	CAON
		Sum Meals & Incid. man. keyed	15.15	
		Total Meals and Incidentals	15.15	

Kilometer Allowance



Date: 18/08/2020

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Trip Number 8550068231

Travel Expense Statement

Trip Number 8550068231

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 20/08/2013 07:00 AM

Trip End Date: 20/08/2013 19:00 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
20/08/2013	230	0.55	Employer Request, Ontario	126.50
				126.50

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

August 20, 2013

Kilometers: 230

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/08/2013	002	Parking/ Tolls	14.00	CAON
		Sum of Receipts	14.00	CAON



Date: 18/08/2020

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Trip Number 8550082980

Travel Expense Statement

Trip Number 8550082980

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 01/12/2015 07:00 AM

Trip End Date: 01/12/2015 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 5. Other Travel TAN:

Trip Type Statutory: CDF: 000

Destination: Mississauga

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: to correct an error

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	24.00
Reimbursement Amount	24.00

Cost Assignment

24.00 CAD of 24.00 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397150000	Dir. Comm. Ops
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	35220	AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 18/08/2020

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Trip Number 8550082980

Travel Expense Statement

Trip Number 8550082980

Personnel Number:

Traveller's Name: Doreen E MAYBEE
Trip Start Date: 01/12/2015 07:00 AM
Trip End Date: 01/12/2015 19:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
01/12/2015	001	Other Travel Expenses	24.00	CAON
		Sum of Receipts	24.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Other Travel Expenses	Description	To correct error



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Travel Expense Statement

Trip Number 8550079977

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 04/06/2015 00:00 AM

Trip End Date: 04/06/2015 00:01 AM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St. Hamilton, ON

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	16.60
Travel Flat Rates	69.56
Sum of Receipts to be Reimbursed	36.31
Reimbursement Amount	122.47

Cost Assignment

122.47 CAD of 122.47 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397150000	Dir. Comm. Ops
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	35220	AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
04/06/2015	004	Lunch	16.60	CAON
		Sum Meals & Incid. man. keyed	16.60	
		Total Meals and Incidentals	16.60	

Kilometer Allowance



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8550079977
Trip Number

Travel Expense Statement

Trip Number 8550079977

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 04/06/2015 00:00 AM

Trip End Date: 04/06/2015 00:01 AM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
04/06/2015	65	0.54	Employer Request, Ontario	34.78
04/06/2015	65	0.54	Employer Request, Ontario	34.78
				69.56

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

June 4, 2015		Kilometers:	65
Start Location:	2720 Britannia Rd Mississauga, ON	End Location:	55 Bay Street Hamilton, ON
June 4, 2015		Kilometers:	65
Start Location:	55 Bay Street Hamilton, ON	End Location:	2720 Britannia Rd Mississauga, ON

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
04/06/2015	001	Parking/ Tolls	5.00	CAON
04/06/2015	002	Parking/ Tolls	10.00	CAON
04/06/2015	003	Parking/ Tolls	21.31	CAON
Sum of Receipts			36.31	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking at 55 Bay St Hamilton, ON
		Additional Text for Receipt	Parking at 55 Bay St Hamilton, ON
002	Parking/ Tolls	Description	Parking at 55 Bay St Hamilton, ON
		Additional Text for Receipt	Parking at 55 Bay St Hamilton, ON
003	Parking/ Tolls	Description	407 ETR Tolls QEW to Hwy 403
		Additional Text for Receipt	For management meeting at 55 Bay St. Hamilton, ON
004	Lunch	Description	lunch
		Additional Text for Receipt	lunch



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Trip Number 8550079977

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 04/06/2015 00:00 AM

Trip End Date: 04/06/2015 00:01 AM

Comments

Road Show-Management Meeting at 55 Bay St. Hamilton

Trip Number 8550079977



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Trip Number 8550085602

Travel Expense Statement

Trip Number 8550085602

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 11/01/2016 00:00 AM

Trip End Date: 05/02/2016 00:00 AM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: various

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Programs

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	63.00
Reimbursement Amount	63.00

Cost Assignment

63.00 CAD of 63.00 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397150000	Dir. Comm. Ops
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	35220	AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



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Trip Number 8550085602

Travel Expense Statement

Trip Number 8550085602

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 11/01/2016 00:00 AM

Trip End Date: 05/02/2016 00:00 AM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
14/01/2016	001	Parking/ Tolls	18.00	CAON
03/02/2016	002	Parking/ Tolls	21.00	CAON
13/01/2016	003	Parking/ Tolls	24.00	CAON
Sum of Receipts			63.00	CAON



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Trip Number 8550092549

Travel Expense Statement

Trip Number 8550092549

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 26/10/2016 08:00 AM

Trip End Date: 26/10/2016 13:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Pearson International Airport, Mississauga, ON

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	27.00
Reimbursement Amount	27.00

Cost Assignment

27.00 CAD of 27.00 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397150000	Dir. Comm. Ops
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	35220	AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



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Trip Number 8550092549

Travel Expense Statement

Trip Number 8550092549

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 26/10/2016 08:00 AM

Trip End Date: 26/10/2016 13:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
26/10/2016	001	Parking/ Tolls	27.00	CAON
		Sum of Receipts	27.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking ticket for meeting at PIA



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Trip Number 8550092550

Travel Expense Statement

Trip Number 8550092550

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 06/10/2016 07:00 AM

Trip End Date: 06/10/2016 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 1 Front Street, Toronto, Ontario

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	17.25
Sum of Receipts to be Reimbursed	21.80
Reimbursement Amount	39.05

Cost Assignment

39.05 CAD of 39.05 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397150000	Dir. Comm. Ops
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	35220	AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/10/2016	002	Lunch	17.25	CAON
		Sum Meals & Incid. man. keyed	17.25	
		Total Meals and Incidentals	17.25	



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Trip Number 8550092550

Travel Expense Statement

Trip Number 8550092550

Personnel Number:

Traveller's Name: Doreen E MAYBEE
Trip Start Date: 06/10/2016 07:00 AM
Trip End Date: 06/10/2016 16:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/10/2016	001	Parking/ Tolls	21.80	CAON
		Sum of Receipts	21.80	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description Additional Text for Receipt	GO Bus receipt Travel to 1 Front Street

Comments

RSMT Meeting & Roadshow



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Trip Number 8550096043

Travel Expense Statement

Trip Number 8550096043

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 03/03/2017 00:00 AM

Trip End Date: 03/03/2017 00:01 AM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 250 Yonge Street, 35th floor, Toronto, ON

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	18.05
Travel Flat Rates	24.53
Sum of Receipts to be Reimbursed	20.80
Reimbursement Amount	63.38

Cost Assignment

63.38 CAD of 63.38 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397150000	Dir. Comm. Ops
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	35220	AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
03/03/2017	003	Lunch	18.05	CAON
		Sum Meals & Incid. man. keyed	18.05	
		Total Meals and Incidentals	18.05	

Kilometer Allowance



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Travel Expense Statement

Trip Number 8550096043

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 03/03/2017 00:00 AM

Trip End Date: 03/03/2017 00:01 AM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
03/03/2017			Employer Request, Ontario	
03/03/2017			Employer Request, Ontario	
03/03/2017			Employer Request, Ontario	
				24.53

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

March 3, 2017

Kilometers:

Start Location: End Location: Bradford Go Station

March 3, 2017 Kilometers: 13

Start Location: Newmarket Go Bus Station End Location: Bradford Go Station

March 3, 2017 Kilometers:

Start Location: Bradford Go Station End Location:

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
03/03/2017	001	Public Transit	10.90	CAON
03/03/2017	002	Public Transit	9.90	CAON
		Sum of Receipts	20.80	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Public Transit	Description	Go Transit
		Additional Text for Receipt	Bradford Go to Union Go Station
002	Public Transit	Description	Union Go to Newmarket Go Bus Terminal
003	Lunch	Description	Lunch



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Trip Number 8550096043

Travel Expense Statement

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 03/03/2017 00:00 AM

Trip End Date: 03/03/2017 00:01 AM

Comments

Freight Advisory Committee Meeting on March 3 - Greater Golden Horseshoe Multimodal Transportation Plan

Trip Number 8550096043



Date: 17/08/2020

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Trip Number 8550097772

Travel Expense Statement

Trip Number 8550097772

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 18/04/2017 06:00 AM

Trip End Date: 18/04/2017 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 370 King Street West

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	18.05
Travel Flat Rates	17.76
Sum of Receipts to be Reimbursed	21.80
Reimbursement Amount	57.61

Cost Assignment

57.61 CAD of 57.61 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397150000	Dir. Comm. Ops
Order:	
Fund:	
Functional Area: 35220	AIR MODE COMMERCIAL

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
18/04/2017	002	Lunch	18.05	CAON
		Sum Meals & Incid. man. keyed	18.05	
		Total Meals and Incidentals	18.05	

Kilometer Allowance



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Travel Expense Statement

Trip Number 8550097772

Personnel Number:

Traveller's Name: Doreen E MAYBEE

Trip Start Date: 18/04/2017 06:00 AM

Trip End Date: 18/04/2017 16:00 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
18/04/2017			Employer Request, Ontario	
18/04/2017			Employer Request, Ontario	
				17.76

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

April 18, 2017

Kilometers:

Start Location: End Location: Bradford GO Station

April 18, 2017

Kilometers:

Start Location: Bradford GO Station End Location:

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
18/04/2017	001	Public Transit	21.80	CAON
		Sum of Receipts	21.80	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Public Transit	Description	GO Train-all day pass
		Additional Text for Receipt	Bradford to Union Station
002	Lunch	Description	Lunch
		Additional Text for Receipt	Lunch

Comments

PSLREB - Hearing



Date: 18/08/2020

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Trip Number 8550071631

Travel Expense Statement

Trip Number 8550071631

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 27/06/2014 05:00 AM

Trip End Date: 27/06/2014 17:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: CDF: 000

Destination: OTTAWA

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: MEETING WITH CIC AND PROVINCE OF ONTARIO

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	15.25
Travel Flat Rates	54.72
Sum of Receipts to be Reimbursed	68.00
Sum of Receipts Paid by Company	533.02
Total Cost of Trip	670.99
Less: Sum of Receipts Paid by Company	(533.02)
Reimbursement Amount	137.97

Cost Assignment

670.99 CAD of 670.99 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397100000	RDG, GTA
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	80110	MANAGEMENT OVER CLOSED

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/06/2014	003	Lunch	15.25	CAON
		Sum Meals & Incid. man. keyed	15.25	



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Trip Number 8550071631

Travel Expense Statement

Trip Number 8550071631

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 27/06/2014 05:00 AM

Trip End Date: 27/06/2014 17:00 PM

	Total Meals and Incidentals	15.25
--	-----------------------------	-------

Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
27/06/2014	96	0.57	Employer Request, Ontario	54.72
				54.72

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

June 27, 2014 Kilometers: 96

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/06/2014	004	Parking/ Tolls	28.00	CAON
27/06/2014	005	Taxi	40.00	CAON
		Sum of Receipts	68.00	CAON
27/06/2014	001	Airfare paid by CBSA	517.37	CAON
27/06/2014	002	X – Do not use	15.65	CAON
		Total Paid by Company	533.02	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Airfare paid by CBSA	Description	TORONTO/OTTAWA RETURN
		Provider Category	Airline
		Provider Code	Air Canada
005	Taxi	Description	CAPITAL TAXI
		Location	OTTAWA



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Trip Number 8550074659

Travel Expense Statement

Trip Number 8550074659

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 02/10/2014 07:00 AM

Trip End Date: 19/11/2014 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Within GTA Region

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Travel Flat Rates	352.53
Sum of Receipts to be Reimbursed	28.25
Reimbursement Amount	380.78

Cost Assignment

380.78 CAD of 380.78 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397100000	RDG, GTA
Order:	
Fund: 2001	Operating-Non-Salary
Functional Area: 80110	MANAGEMENT OVER CLOSED

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	

Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
02/10/2014	51	0.58	Employer Request, Ontario	29.33



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Trip Number 8550074659

Travel Expense Statement

Trip Number 8550074659

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 02/10/2014 07:00 AM

Trip End Date: 19/11/2014 16:00 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
02/10/2014	10	0.58	Employer Request, Ontario	5.75
02/10/2014	8	0.58	Employer Request, Ontario	4.60
02/10/2014	10	0.58	Employer Request, Ontario	5.75
02/10/2014	-	0.58	Employer Request, Ontario	
03/10/2014		0.58	Employer Request, Ontario	
03/10/2014	9	0.58	Employer Request, Ontario	5.18
03/10/2014	16	0.58	Employer Request, Ontario	9.20
03/10/2014	7	0.58	Employer Request, Ontario	4.03
03/10/2014		0.58	Employer Request, Ontario	
20/10/2014	26	0.58	Employer Request, Ontario	14.95
20/10/2014		0.58	Employer Request, Ontario	
22/10/2014	37	0.58	Employer Request, Ontario	21.28
22/10/2014		0.58	Employer Request, Ontario	
31/10/2014		0.58	Employer Request, Ontario	
31/10/2014	14	0.58	Employer Request, Ontario	8.05
31/10/2014	-	0.58	Employer Request, Ontario	
06/11/2014	27	0.58	Employer Request, Ontario	15.53
06/11/2014	46	0.58	Employer Request, Ontario	26.45
06/11/2014		0.58	Employer Request, Ontario	
19/11/2014	12	0.58	Employer Request, Ontario	6.90
19/11/2014	12	0.58	Employer Request, Ontario	6.90
				352.53

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

October 2, 2014

Kilometers:

Start Location:

End Location: PIA Terminal 1

October 2, 2014

Kilometers: **10**

Start Location: PIA Terminal 1

End Location: 1980 Matheson Blvd E, Mississauga, Ontario

October 2, 2014

Kilometers: **8**

Start Location: 1980 Matheson Blvd E, Mississauga, Ontario

End Location: 2720 Britannia Rd E, Mississauga, Ontario

October 2, 2014

Kilometers: **10**

Start Location: 2720 Britannia Rd, E, Mississauga, Ontario

End Location: PIA Terminal 3

October 2, 2014

Kilometers:



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Trip Number 8550074659

Travel Expense Statement

Trip Number 8550074659

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 02/10/2014 07:00 AM

Trip End Date: 19/11/2014 16:00 PM

Start Location: PIA Terminal 3 End Location:

October 3, 2014 Kilometers: --

Start Location: End Location: Sheraton Gateway Hotel, Mississauga

October 3, 2014 Kilometers: 9

Start Location: Sheraton Gateway Hotel, Mississauga End Location: 4567 Dixie Rd, Mississauga, Ontario

October 3, 2014 Kilometers: 16

Start Location: 4567 Dixie Rd, Mississauga, Ontario End Location: 385 Rexdale Blvd, Toronto, Ontario

October 3, 2014 Kilometers: 7

Start Location: 385 Rexdale Blvd, Toronto, Ontario End Location: PIA Terminal 1

October 3, 2014 Kilometers: --

Start Location: PIA Terminal 1 End Location:

October 20, 2014 Kilometers: 26

Start Location: 1980 Matheson Blvd E, Mississauga, Ontario End Location: 4900 Yonge St, Toronto

October 20, 2014 Kilometers: --

Start Location: 4900 Yonge St, Toronto, Ontario End Location:

October 22, 2014 Kilometers: 37

Start Location: 1980 Matheson Blvd E, Mississauga, Ontario End Location: 3900 Victoria Park Avenue, Toronto

October 22, 2014 Kilometers: --

Start Location: 3900 Victoria Park Avenue, Toronto, Ontario End Location:

October 31, 2014 Kilometers: --

Start Location: End Location: 3389 Steeles Avenue W, Toronto, Ontario

October 31, 2014 Kilometers: 14

Start Location: 3389 Steeles Avenue W, Toronto, Ontario End Location: 55 Town Centre Court, Toronto, Ontario

October 31, 2014 Kilometers: --

Start Location: 55 Town Centre Court, Toronto, Ontario End Location:

November 6, 2014 Kilometers: 27

Start Location: 1980 Matheson Blvd, Mississauga, Ontario End Location: 60 Harbour St, Toronto, Ontario



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Trip Number 8550074659

Travel Expense Statement

Trip Number 8550074659

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 02/10/2014 07:00 AM

Trip End Date: 19/11/2014 16:00 PM

November 6, 2014

Start Location: 60 Harbour St, Toronto, Ontario

Kilometers:**46**

End Location: 6900 Airport Rd, Mississauga, Ontario

November 6, 2014

Start Location: 6900 Airport Rd, Mississauga, Ontario

Kilometers:**November 19, 2014**

Start Location: 1980 Matheson Blvd E, Mississauga, Ontario

Kilometers:**12**

End Location: 5353 Dundas St W, Toronto, Ontario

November 19, 2014

Start Location: 5353 Dundas St W, Toronto, Ontario

Kilometers:**12**

End Location: 1980 Matheson Blvd E, Mississauga, Ontario

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/10/2014	001	Parking/ Tolls	4.50	CAON
22/10/2014	002	Parking/ Tolls	8.75	CAON
06/11/2014	003	Parking/ Tolls	6.00	CAON
19/11/2014	004	Parking/ Tolls	9.00	CAON
		Sum of Receipts	28.25	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking
002	Parking/ Tolls	Description	Parking



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Trip Number 8550075112

Travel Expense Statement

Trip Number 8550075112

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 04/12/2014 12:00 PM

Trip End Date: 04/12/2014 18:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 2. Key stakeholders TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Within GTA Region

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Travel Flat Rates	41.98
Sum of Receipts to be Reimbursed	14.00
Reimbursement Amount	55.98

Cost Assignment

55.98 CAD of 55.98 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397100000	RDG, GTA
Order:	
Fund: 2001	Operating-Non-Salary
Functional Area: 80110	MANAGEMENT OVER CLOSED

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	

Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
04/12/2014			Employer Request, Ontario	



Date: 17/08/2020

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Trip Number 8550075112

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 04/12/2014 12:00 PM

Trip End Date: 04/12/2014 18:00 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
04/12/2014			Employer Request, Ontario	41.98

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

December 4, 2014 Kilometers: 28

Start Location: 1980 Matheson Blvd E, Mississauga End Location: 250 Dundas St West, Toronto

December 4, 2014 Kilometers:

Start Location: 250 Dundas St West, Toronto End Location:

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
04/12/2014	001	Parking/ Tolls	14.00	CAON
Sum of Receipts			14.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking

Comments

Annual Meeting with ACLC



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Trip Number 8550078040

Travel Expense Statement

Trip Number 8550078040

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 21/01/2015 06:00 AM

Trip End Date: 04/03/2015 16:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Within GTA Region

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	49.05
Travel Flat Rates	134.32
Sum of Receipts to be Reimbursed	32.65
Reimbursement Amount	216.02

Cost Assignment

216.02 CAD of 216.02 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397100000	RDG, GTA
Order:	
Fund: 2001	Operating-Non-Salary
Functional Area: 80110	MANAGEMENT OVER CLOSED

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
21/01/2015	004	Lunch	16.35	CAON
23/01/2015	005	Lunch	16.35	CAON
04/03/2015	006	Lunch	16.35	CAON
Sum Meals & Incid. man. keyed			49.05	



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Trip Number 8550078040

Travel Expense Statement

Trip Number 8550078040

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 21/01/2015 06:00 AM

Trip End Date: 04/03/2015 16:30 PM

	Total Meals and Incidentals	49.05
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Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
21/01/2015		0.56	Employer Request, Ontario	
21/01/2015		0.56	Employer Request, Ontario	
23/01/2015		0.56	Employer Request, Ontario	
23/01/2015		0.56	Employer Request, Ontario	
04/03/2015		0.56	Employer Request, Ontario	
04/03/2015		0.56	Employer Request, Ontario	
				134.32

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

January 21, 2015

Kilometers:

Start Location:

End Location:

75 Lower Simcoe St,
Toronto, Ontario

January 21, 2015

Kilometers:

Start Location:

End Location:

75 Lower Simcoe St,
Toronto, Ontario

January 23, 2015

Kilometers:

Start Location:

End Location:

2 Eirann Quay, Toronto,
Ontario

January 23, 2015

Kilometers:

Start Location:

End Location:

2 Eirann Quay, Toronto,
Ontario

March 4, 2015

Kilometers: 31

Start Location:

End Location:

3389 Steeles Ave East,
Toronto, Ontario

March 4, 2015

Kilometers:

Start Location:

End Location:

3389 Steeles Ave East,
Toronto, Ontario

Receipts

Date No. Expense Type

Amount (CAD) Tax Jur. Code



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Trip Number 8550078040

Travel Expense Statement

Trip Number 8550078040

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 21/01/2015 06:00 AM

Trip End Date: 04/03/2015 16:30 PM

23/01/2015	001	Parking/ Tolls	16.00	CAON
15/02/2015	002	Misc. Business Services	7.90	CAON
04/03/2015	003	Parking/ Tolls	8.75	CAON
		Sum of Receipts		32.65 CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking
002	Misc. Business Services	Description	Passport Photo Receipt for Security Clearance
		Additional Text for Receipt	Need to update TS security clearance, new passport sized photos required
003	Parking/ Tolls	Description	Parking
004	Lunch	Description	Lunch Expense
005	Lunch	Description	Lunch Expense
006	Lunch	Description	Lunch Expense



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Trip Number 8550078877

Travel Expense Statement

Trip Number 8550078877

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 27/05/2015 05:00 AM

Trip End Date: 27/05/2015 19:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 2. Key stakeholders TAN: AAC585577

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Ottawa

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Travel Flat Rates	55.64
Sum of Receipts to be Reimbursed	76.50
Sum of Receipts Paid by Company	392.39
Total Cost of Trip	524.53
Less: Sum of Receipts Paid by Company	(392.39)
Reimbursement Amount	132.14

Cost Assignment

524.53 CAD of 524.53 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397100000	RDG, GTA
Order:	
Fund: 2001	Operating-Non-Salary
Functional Area: 80101	MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



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8550078877
Trip Number

Travel Expense Statement

Trip Number 8550078877

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 27/05/2015 05:00 AM

Trip End Date: 27/05/2015 19:30 PM

Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
27/05/2015			Employer Request, Ontario	
27/05/2015			Employer Request, Ontario	
				55.64

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

May 27, 2015

Kilometers:

Start Location: End Location: Pearson Airport Terminal 1

May 27, 2015

Kilometers:

Start Location: Pearson Airport Terminal 1 End Location:

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
27/05/2015	002	Taxi	46.50	CAON
27/05/2015	003	Parking/ Tolls	30.00	CAON
		Sum of Receipts	76.50	CAON
27/05/2015	001	Airfare paid by CBSA	392.39	CAON
		Total Paid by Company	392.39	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Airfare paid by CBSA	Provider Category	Airline
		Provider Code	Air Canada
002	Taxi	Location	Ottawa
		Additional Text for Receipt	Taxi from 111 Sussex Dr to Ottawa Airport

Comments

Air Consultative Committee Meeting, May 27, 2015



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Trip Number 8550079432

Travel Expense Statement

Trip Number 8550079432

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 04/06/2015 10:00 AM

Trip End Date: 04/06/2015 17:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Within GTA Region

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Travel Flat Rates	96.30
Sum of Receipts to be Reimbursed	16.00
Reimbursement Amount	112.30

Cost Assignment

112.30 CAD of 112.30 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397100000	RDG, GTA
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	80110	MANAGEMENT OVER CLOSED

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	

Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
04/06/2015			Employer Request, Ontario	



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Trip Number 8550079432

Travel Expense Statement

Trip Number 8550079432

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 04/06/2015 10:00 AM

Trip End Date: 04/06/2015 17:30 PM

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
04/06/2015			Employer Request, Ontario	96.30

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

June 4, 2015 Kilometers: 54

Start Location: 1980 Matheson Blvd East, Mississauga End Location: 55 Bay St North, Hamilton

June 4, 2015 Kilometers:

Start Location: 55 Bay St North, Hamilton End Location:

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
04/06/2015	001	Parking/ Tolls	16.00	CAON
Sum of Receipts			16.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking
		Additional Text for Receipt	Hamilton - RSMT and Staff Town Hall



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Trip Number 8550079454

Travel Expense Statement

Trip Number 8550079454

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 18/06/2015 06:00 AM

Trip End Date: 18/06/2015 18:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 2. Key stakeholders TAN: AAC550585

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Ottawa

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	16.60
Travel Flat Rates	55.64
Sum of Receipts to be Reimbursed	70.00
Sum of Receipts Paid by Company	382.22
Total Cost of Trip	524.46
Less: Sum of Receipts Paid by Company	(382.22)
Reimbursement Amount	142.24

Cost Assignment

524.46 CAD of 524.46 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397100000	RDG, GTA
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	80101	MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
18/06/2015	003	Lunch	16.60	CAON
		Sum Meals & Incid. man. keyed	16.60	



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Trip Number 8550079454

Travel Expense Statement

Trip Number 8550079454

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 18/06/2015 06:00 AM

Trip End Date: 18/06/2015 18:00 PM

	Total Meals and Incidentals	16.60
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Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
18/06/2015			Employer Request, Ontario	
18/06/2015			Employer Request, Ontario	55.64

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

June 18, 2015

Kilometers:

Start Location: End Location: Toronto Pearson Terminal 1

June 18, 2015

Kilometers:

Start Location: Toronto Pearson Terminal 1 End Location:

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
18/06/2015	002	Taxi	40.00	CAON
18/06/2015	004	Parking/ Tolls	30.00	CAON
		Sum of Receipts	70.00	CAON
18/06/2015	001	Airfare paid by CBSA	343.80	CAON
18/06/2015	005	HRG/STS Fees	38.42	CAON
		Total Paid by Company	382.22	CAON

No.	Receipt	Type	Content
001	Airfare paid by CBSA	Provider Category	Airline
		Provider Code	Air Canada
002	Taxi	Location	Ottawa



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Trip Number 8550079454

Travel Expense Statement

Trip Number 8550079454

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 18/06/2015 06:00 AM

Trip End Date: 18/06/2015 18:00 PM

Additional Receipt Information

005	HRG/STS Fees	Description	HRG STS Fee
		Additional Text for Receipt	HRG / STS Fee while using the online portal.

Comments

International to Domestic Meeting on June 18, 2015 (Ottawa)



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Trip Number 8550089901

Travel Expense Statement

Trip Number 8550089901

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 17/06/2016 09:00 AM

Trip End Date: 23/06/2016 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Orillia, Scarborough

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	34.00
Travel Flat Rates	196.10
Sum of Receipts to be Reimbursed	16.00
Reimbursement Amount	246.10

Cost Assignment

246.10 CAD of 246.10 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397100000	RDG, GTA
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	80101	MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
17/06/2016	002	Lunch	17.00	CAON
23/06/2016	003	Lunch	17.00	CAON
Sum Meals & Incid. man. keyed			34.00	
Total Meals and Incidentals			34.00	



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Trip Number 8550089901

Travel Expense Statement

Trip Number 8550089901

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 17/06/2016 09:00 AM

Trip End Date: 23/06/2016 16:00 PM

Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
17/06/2016			Employer Request, Ontario	
17/06/2016			Employer Request, Ontario	
23/06/2016			Employer Request, Ontario	
23/06/2016			Employer Request, Ontario	196.10

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

June 17, 2016
Kilometers:

Start Location: End Location: 5899 Rama Rd, Rama

June 17, 2016
Kilometers:

Start Location: End Location:

June 23, 2016
Kilometers:

Start Location:

End Location: 55 Town Centre Court, Scarborough

June 23, 2016
Kilometers:

Start Location: 55 Town Centre Court, Scarborough

End Location:

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
17/06/2016	001	Parking/ Tolls	16.00	CAON
		Sum of Receipts	16.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking



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Trip Number 8550089901

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 17/06/2016 09:00 AM

Trip End Date: 23/06/2016 16:00 PM

Comments

Travel within Region for stakeholder and employee meetings

Trip Number 8550089901



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Travel Expense Statement

Trip Number 8550100476

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 05/10/2017 05:00 AM

Trip End Date: 05/10/2017 17:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 1. Operational Activities TAN: AAC525821

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Ottawa

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Travel Flat Rates	57.72
Sum of Receipts to be Reimbursed	110.00
Sum of Receipts Paid by Company	665.97
Total Cost of Trip	833.69
Less: Sum of Receipts Paid by Company	(665.97)
Reimbursement Amount	167.72

Cost Assignment

833.69 CAD of 833.69 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397100000	RDG, GTA
Order:	
Fund:	
Functional Area: 80101	MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



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Trip Number 8550100476

Travel Expense Statement

Trip Number 8550100476

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 05/10/2017 05:00 AM

Trip End Date: 05/10/2017 17:00 PM

Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
05/10/2017			Employer Request, Ontario	
05/10/2017			Employer Request, Ontario	
				57.72

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

October 5, 2017

Kilometers:

Start Location: Pearson Airport Terminal 1 Parking

October 5, 2017

Kilometers:

Start Location: Pearson Airport Terminal 1 Parking End Location:

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
05/10/2017	003	Taxi	40.00	CAON
05/10/2017	004	Taxi	40.00	CAON
05/10/2017	005	Parking/ Tolls	30.00	CAON
		Sum of Receipts	110.00	CAON
05/10/2017	001	Airfare paid by CBSA	641.11	CAON
05/10/2017	002	HRG/STS Fees	24.86	CAON
		Total Paid by Company	665.97	CAON

No.	Receipt	Type	Content
001	Airfare paid by CBSA	Description	Airfare - Toronto to Ottawa Return
		Provider Category	Airline
		Provider Code	Air Canada
002	HRG/STS Fees	Description	HRG/STS Fees



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Trip Number 8550100476

Travel Expense Statement

Trip Number 8550100476

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 05/10/2017 05:00 AM

Trip End Date: 05/10/2017 17:00 PM

Additional Receipt Information

003	Taxi	Description	Taxi
		Location	Ottawa
		Additional Text for Receipt	Taxi from Ottawa Airport to 191 Laurier Ave
004	Taxi	Description	Taxi
		Location	Ottawa
		Additional Text for Receipt	Taxi from 191 Laurier to Ottawa Airport
005	Parking/ Tolls	Description	Terminal 1 Parking

Comments

Depart from home Thursday, October 5, 2017. Travel to the airport for flight to Ottawa. Return Thursday, October 5, 2017. Purpose FIMC. (Same day travel).



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Trip Number 8550078931

Travel Expense Statement

Trip Number 8550078931

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 20/05/2015 07:00 AM

Trip End Date: 20/05/2015 19:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: Yes

Category: 3. Internal governance TAN: AAC520572

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Ottawa

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	16.60
Travel Flat Rates	55.64
Sum of Receipts to be Reimbursed	71.50
Sum of Receipts Paid by Company	468.22
Total Cost of Trip	611.96
Less: Sum of Receipts Paid by Company	(468.22)
Reimbursement Amount	143.74

Cost Assignment

611.96 CAD of 611.96 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397100000	RDG, GTA
Order:	
Fund: 2001	Operating-Non-Salary
Functional Area: 80101	MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/05/2015	004	Lunch	16.60	CAON
		Sum Meals & Incid. man. keyed	16.60	



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Trip Number 8550078931

Travel Expense Statement

Trip Number 8550078931

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 20/05/2015 07:00 AM

Trip End Date: 20/05/2015 19:30 PM

	Total Meals and Incidentals	16.60
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Kilometer Allowance

Date	km	Flat Rate *	Vehicle Type, Vehicle Class	Amount (CAD)
20/05/2015			Employer Request, Ontario	
20/05/2015			Employer Request, Ontario	
				55.64

* flat rates are rounded-up 2 decimal places

Daily Kilometers

OT Mileage

May 20, 2015**Kilometers:**

Start Location: End Location: Pearson Airport Terminal 1

May 20, 2015**Kilometers:**

Start Location: Pearson Airport Terminal 1 End Location:

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/05/2015	002	Taxi	41.50	CAON
20/05/2015	003	Parking/ Tolls	30.00	CAON
		Sum of Receipts	71.50	CAON
20/05/2015	001	Airfare paid by CBSA	468.22	CAON
		Total Paid by Company	468.22	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Airfare paid by CBSA	Provider Category	Airline
		Provider Code	Air Canada
002	Taxi	Location	Ottawa
		Additional Text for Receipt	Taxi from 191 Laurier to Ottawa Airport



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Trip Number 8550078931

Travel Expense Statement

Personnel Number:

Traveller's Name: Goran VRAGOVIC

Trip Start Date: 20/05/2015 07:00 AM

Trip End Date: 20/05/2015 19:30 PM

Comments

Meeting with Vice-President, Operations Branch and Headquarters Executives

Trip Number 8550078931



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Trip Number 8550067807

Travel Expense Statement

Trip Number 8550067807

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 25/11/2013 07:00 AM

Trip End Date: 25/11/2013 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 6. Prior to April 1, 2014/ SAP TAN:

Trip Type Statutory: CDF: 000

Destination: Toronto

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: OFC AN APEX MEETINGS

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	10.00
Reimbursement Amount	10.00

Cost Assignment

10.00 CAD of 10.00 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397180000	Director CPS
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	80101	MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 18/08/2020

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Trip Number 8550067807

Travel Expense Statement

Trip Number 8550067807

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 25/11/2013 07:00 AM

Trip End Date: 25/11/2013 19:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
25/11/2013	001	Parking/ Tolls	10.00	CAON
		Sum of Receipts	10.00	CAON



Date: 14/08/2020

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Trip Number 8550088224

Travel Expense Statement

Trip Number 8550088224

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 04/06/2015 06:30 AM

Trip End Date: 04/06/2015 07:30 AM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay Street, Hamilton, Ontario

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	10.00
Reimbursement Amount	10.00

Cost Assignment

10.00 CAD of 10.00 CAD assigned to:

Company Code:	0850	CBSA / ASFC
Cost Center:	397180000	Director CPS
Order:		
Fund:	2001	Operating-Non-Salary
Functional Area:	80101	MANAGEMENT & OVERSIGHT PR

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550088224

Travel Expense Statement

Trip Number 8550088224

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 04/06/2015 06:30 AM

Trip End Date: 04/06/2015 07:30 AM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
04/06/2015	001	Parking/ Tolls	10.00	CAON
		Sum of Receipts	10.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking

Comments

RSMT meeting plus Town Hall session with TOD staff in Hamilton, Ontario.
Used fleet vehicle. Incurred \$10.00 parking charge.



Date: 14/08/2020

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Trip Number 8550107331

Travel Expense Statement

Trip Number 8550107331

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 11/06/2018 11:30 AM

Trip End Date: 11/06/2018 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay Street North, Hamilton

Departure Address 1980 Matheson Blvd. East, Mississauga, On

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	19.20
Sum of Receipts to be Reimbursed	7.00
Reimbursement Amount	26.20

Cost Assignment

26.20 CAD of 26.20 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397160000	Dir. Trade Ops
Order:	
Fund:	
Functional Area: 10500	Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
11/06/2018	001	Lunch	19.20	CAON
		Sum Meals & Incid. man. keyed	19.20	
		Total Meals and Incidentals	19.20	



Date: 14/08/2020

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Trip Number 8550107331

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 11/06/2018 11:30 AM

Trip End Date: 11/06/2018 16:00 PM

Trip Number 8550107331

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
11/06/2018	002	Parking/ Tolls	7.00	CAON
		Sum of Receipts	7.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
002	Parking/ Tolls	Additional Text for Receipt	Meter Parking and, therefore, no receipt.

Comments

Town Hall and National Public Service Week activities.

Town Hall in Hamilton Trade Office on 11JUN2018

Used fleet car to reduce costs.



Date: 14/08/2020

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Trip Number 8550108849

Travel Expense Statement

Trip Number 8550108849

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 15/08/2018 13:20 PM

Trip End Date: 15/08/2018 20:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No
 Category: 1. Operational Activities TAN:
 Trip Type Statutory: 1- Regular Travel CDF: 000
 Destination: 55 Towne Centre, Scarborough
 Departure Address: 1980 Matheson Blvd, Mississauga, Ontario
 RATOC Number:
 Travel Plan Reference Number:
 Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	7.50
Reimbursement Amount	7.50

Cost Assignment

7.50 CAD of 7.50 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397160000	Dir. Trade Ops
Order:	
Fund:	
Functional Area: 10500	Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550108849

Travel Expense Statement

Trip Number 8550108849

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 15/08/2018 13:20 PM

Trip End Date: 15/08/2018 20:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
15/08/2018	001	Parking/ Tolls	6.00	CAON
15/08/2018	002	Parking/ Tolls	1.50	CAON
Sum of Receipts			7.50	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking
002	Parking/ Tolls	Description	Additional parking costs

Comments

Disciplinary Meeting held in Scarborough TOD office



Date: 14/08/2020

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Trip Number 8550111579

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 13/11/2018 08:50 AM

Trip End Date: 13/11/2018 14:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay Street North, Hamilton, ON L8R 3P7

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	19.85
Reimbursement Amount	19.85

Cost Assignment

19.85 CAD of 19.85 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397160000	Dir. Trade Ops
Order:	
Fund:	
Functional Area: 10500	Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
13/11/2018	001	Lunch	19.85	CAON
		Sum Meals & Incid. man. keyed	19.85	
		Total Meals and Incidentals	19.85	



Date: 14/08/2020

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Trip Number 8550111579

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 13/11/2018 08:50 AM

Trip End Date: 13/11/2018 14:00 PM

Additional Receipt Information

No.	Receipt	Type	Content
001	Lunch	Description	Lunch

Comments

Travel for the Diversity and Inclusion Town Hall as well as management meeting on the future of COD-TOD pilot on Tuesday, November 13, 2018.

Trip Number 8550111579



Date: 19/08/2020

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Trip Number 8550112105

Travel Expense Statement

Trip Number 8550112105

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 06/12/2018 08:00 AM

Trip End Date: 06/12/2018 16:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay Street North, Hamilton, ON L8R 3P7

Departure Address: 1980 Matheson Blvd East, Mississauga, On

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	11.00
Reimbursement Amount	11.00

Cost Assignment

11.00 CAD of 11.00 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397160000	Dir. Trade Ops
Order:	
Fund:	
Functional Area: 10500	Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 19/08/2020

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Trip Number 8550112105

Travel Expense Statement

Trip Number 8550112105

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 06/12/2018 08:00 AM

Trip End Date: 06/12/2018 16:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/12/2018	001	Parking/ Tolls	11.00	CAON
		Sum of Receipts	11.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Parking/ Tolls	Description	Parking

Comments

Hamilton Town Hall with all staff
Fleet Car used to reduce travel costs



Date: 14/08/2020

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Trip Number 8550112356

Travel Expense Statement

Trip Number 8550112356

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 10/12/2018 05:15 AM

Trip End Date: 10/12/2018 23:15 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No
 Category: 1. Operational Activities TAN:
 Trip Type Statutory: 1- Regular Travel CDF: 000
 Destination: 451 Talbot Street, London, Ontario
 Departure Address: 1980 Matheson Blvd East, Mississauga
 RATOC Number:
 Travel Plan Reference Number:
 Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	90.10
Sum of Receipts to be Reimbursed	15.00
Reimbursement Amount	105.10

Cost Assignment

105.10 CAD of 105.10 CAD assigned to:

Company Code: 0850 CBSA / ASFC
 Cost Center: 397160000 Dir. Trade Ops
 Order:
 Fund:
 Functional Area: 10500 Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
10/12/2018	001	Breakfast	20.25	CAON
10/12/2018	002	Lunch	19.85	CAON
10/12/2018	003	Dinner	50.00	CAON
Sum Meals & Incid. man. keyed			90.10	
Total Meals and Incidentals			90.10	



Date: 14/08/2020

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Trip Number 8550112356

Travel Expense Statement

Trip Number 8550112356

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 10/12/2018 05:15 AM

Trip End Date: 10/12/2018 23:15 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
10/12/2018	004	Parking/ Tolls	15.00	CAON
		Sum of Receipts	15.00	CAON

Additional Receipt Information

No.	Receipt	Type	Content
001	Breakfast	Description	Breakfast
002	Lunch	Description	Lunch
003	Dinner	Description	Dinner
004	Parking/ Tolls	Description	Parking

Comments

London Town Hall



Date: 14/08/2020

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Trip Number 8550116778

Travel Expense Statement

Trip Number 8550116778

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 20/03/2019 08:45 AM

Trip End Date: 20/03/2019 17:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay Street, Hamilton

Departure Address: 1980 Matheson Blvd East, Mississauga

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Sum of Receipts to be Reimbursed	12.00
Reimbursement Amount	12.00

Cost Assignment

12.00 CAD of 12.00 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397160000	Dir. Trade Ops
Order:	
Fund:	
Functional Area: 10500	Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550116778

Travel Expense Statement

Trip Number 8550116778

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 20/03/2019 08:45 AM

Trip End Date: 20/03/2019 17:30 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
20/03/2019	001	Parking/ Tolls	12.00	CAON
		Sum of Receipts	12.00	CAON

Comments

Inside-Out Panel Workshop hosted by GTAR Wellness Committee in the morning; GTAR Wellness Committee meeting in the afternoon. EIOD fleet car was used to reduce costs.



Date: 14/08/2020

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Trip Number 8550120536

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 17/06/2019 00:00 AM

Trip End Date: 17/06/2019 00:01 AM

General Trip Information

Country/Region: CA-Ontario STA Applied: No
 Category: 1. Operational Activities TAN:
 Trip Type Statutory: 1- Regular Travel CDF: 000
 Destination: 55 Bay St. N., Hamilton
 Departure Address: 1980 Matheson Blvd. E., Mississauga
 RATOC Number:
 Travel Plan Reference Number:
 Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Reimbursement Amount	0.00

Cost Assignment

of assigned to:

Company Code:

Cost Center:

Order:

Fund:

Functional Area:

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
		Sum Meals & Incid. man. keyed	0.00	
		Total Meals and Incidentals	0.00	



Date: 14/08/2020

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Trip Number 8550120536

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 17/06/2019 00:00 AM

Trip End Date: 17/06/2019 00:01 AM

Comments

Travel for the Hamilton TOD Town Hall taking place on Monday, June 17, 2019.

Trip CANCELLED.

Trip Number 8550120536



Date: 14/08/2020

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Trip Number 8550121812

Travel Expense Statement

Trip Number 8550121812

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 28/08/2019 05:30 AM

Trip End Date: 28/08/2019 20:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No
 Category: 1. Operational Activities TAN:
 Trip Type Statutory: 1- Regular Travel CDF: 000
 Destination: 451 Talbot St., London, ON
 Departure Address: 1980 Matheson Blvd. E., Mississauga
 RATOC Number:
 Travel Plan Reference Number:
 Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	71.15
Sum of Receipts to be Reimbursed	15.00
Reimbursement Amount	86.15

Cost Assignment

86.15 CAD of 86.15 CAD assigned to:

Company Code: 0850 CBSA / ASFC
 Cost Center: 397160000 Dir. Trade Ops
 Order:
 Fund:
 Functional Area: 10500 Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
28/08/2019	002	Breakfast	20.50	CAON
28/08/2019	003	Dinner	50.65	CAON
		Sum Meals & Incid. man. keyed	71.15	
		Total Meals and Incidentals	71.15	



Date: 14/08/2020

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Trip Number 8550121812

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 28/08/2019 05:30 AM

Trip End Date: 28/08/2019 20:00 PM

Trip Number 8550121812

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
28/08/2019	001	Parking/ Tolls	15.00	CAON
		Sum of Receipts	15.00	CAON

Comments

Travel for an employee engagement session with London TOD staff on Wednesday, August 28, 2019.



Date: 14/08/2020

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Trip Number 8550122253

Travel Expense Statement

Trip Number 8550122253

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 22/08/2019 06:30 AM

Trip End Date: 22/08/2019 18:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St. N., Hamilton, ON

Departure Address: 1980 Matheson Blvd. E., Mississauga, ON

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	20.10
Sum of Receipts to be Reimbursed	11.00
Reimbursement Amount	31.10

Cost Assignment

31.10 CAD of 31.10 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397160000	Dir. Trade Ops
Order:	
Fund:	
Functional Area: 10500	Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
22/08/2019	002	Lunch	20.10	CAON
		Sum Meals & Incid. man. keyed	20.10	
		Total Meals and Incidentals	20.10	



Date: 14/08/2020

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Trip Number 8550122253

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 22/08/2019 06:30 AM

Trip End Date: 22/08/2019 18:30 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
22/08/2019	001	Parking/ Tolls	11.00	CAON
		Sum of Receipts	11.00	CAON

Comments

Travel to Hamilton TOD Office on Thursday, August 22, 2019.



Date: 14/08/2020

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Trip Number 8550122608

Travel Expense Statement

Trip Number 8550122608

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 05/09/2019 07:00 AM

Trip End Date: 05/09/2019 18:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 3. Internal governance TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: Hamilton International Airport

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Greater Toronto Area Region

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	20.10
Reimbursement Amount	20.10

Cost Assignment

20.10 CAD of 20.10 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397160000	Dir. Trade Ops
Order:	
Fund:	
Functional Area: 10500	Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
05/09/2019	001	Lunch	20.10	CAON
		Sum Meals & Incid. man. keyed	20.10	
		Total Meals and Incidentals	20.10	



Date: 14/08/2020

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Trip Number 8550122608

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 05/09/2019 07:00 AM

Trip End Date: 05/09/2019 18:00 PM

Comments

RSMT Meeting and EE Engagement Session at John C. Munroe International Airport in Hamilton, Ontario

Trip Number 8550122608



Date: 14/08/2020

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Trip Number 8550122609

Travel Expense Statement

Trip Number 8550122609

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 06/09/2019 07:00 AM

Trip End Date: 06/09/2019 19:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St. N., Hamilton, ON

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Human Resources

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	20.10
Sum of Receipts to be Reimbursed	11.00
Reimbursement Amount	31.10

Cost Assignment

31.10 CAD of 31.10 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397160000	Dir. Trade Ops
Order:	
Fund:	
Functional Area: 10500	Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/09/2019	002	Lunch	20.10	CAON
		Sum Meals & Incid. man. keyed	20.10	
		Total Meals and Incidentals	20.10	



Date: 14/08/2020

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Trip Number 8550122609

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 06/09/2019 07:00 AM

Trip End Date: 06/09/2019 19:00 PM

Receipts

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
06/09/2019	001	Parking/ Tolls	11.00	CAON
		Sum of Receipts	11.00	CAON

Comments

Meeting with EE and CIU (re: Labour Relations case)

Trip Number 8550122609



Date: 14/08/2020

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Trip Number 8550123451

Travel Expense Statement

Trip Number 8550123451

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 24/09/2019 05:30 AM

Trip End Date: 24/09/2019 17:00 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 55 Bay St. N., Hamilton, ON

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	20.10
Reimbursement Amount	20.10

Cost Assignment

20.10 CAD of 20.10 CAD assigned to:

Company Code: 0850 CBSA / ASFC
 Cost Center: 397160000 Dir. Trade Ops
 Order:
 Fund:
 Functional Area: 10500 Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
24/09/2019	001	Lunch	20.10	CAON
		Sum Meals & Incid. man. keyed	20.10	
		Total Meals and Incidentals	20.10	



Date: 14/08/2020

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Trip Number 8550123451

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 24/09/2019 05:30 AM

Trip End Date: 24/09/2019 17:00 PM

Comments

ATIP Presentation 8:00-9:30 a.m.

Hamilton Town Hall 9:00-12:00 am.

Employmenet Engagement 1:00-4:00 pm

Trip Number 8550123451



Date: 14/08/2020

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Trip Number 8550123452

Travel Expense Statement

Trip Number 8550123452

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 26/09/2019 06:30 AM

Trip End Date: 26/09/2019 19:30 PM

General Trip Information

Country/Region: CA-Ontario STA Applied: No

Category: 1. Operational Activities TAN:

Trip Type Statutory: 1- Regular Travel CDF: 000

Destination: 451 Talbot St., London, ON

Departure Address

RATOC Number:

Travel Plan Reference Number:

Objective: Operations

Summary of Settlement

Expenses	Amount (CAD)
Per Diems for Meals	40.60
Reimbursement Amount	40.60

Cost Assignment

40.60 CAD of 40.60 CAD assigned to:

Company Code: 0850	CBSA / ASFC
Cost Center: 397160000	Dir. Trade Ops
Order:	
Fund:	
Functional Area: 10500	Comm.-Trade Facil. & Comp

Meals and Incidentals (Per Diem and Receipts)

Date	No.	Expense Type	Amount (CAD)	Tax Jur. Code
26/09/2019	001	Lunch	20.10	CAON
26/09/2019	002	Breakfast	20.50	CAON
		Sum Meals & Incid. man. keyed	40.60	
		Total Meals and Incidentals	40.60	



Date: 14/08/2020

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Trip Number 8550123452

Travel Expense Statement

Personnel Number:

Traveller's Name: JEANIE CHOW

Trip Start Date: 26/09/2019 06:30 AM

Trip End Date: 26/09/2019 19:30 PM

Comments

London Town Hall and EE Engagement

Trip Number 8550123452